

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 11087

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

3. Name and address of person filing.

Name KURT W STEENHOEK

P.O. Box, Bldg., Room No., if any

Street 17100 E. 32ND PLACE

City AURORA

State Colorado ZIP Code + 4 80011

4. Name, file number, and address of labor organization.

Name PLUMBERS LOCAL 3

Labor Organization File Number 023-480

P.O. Box, Building and Room Number, if any

Street 17100 E. 32ND APLACE

City AURORA

State Colorado ZIP Code + 4 80011

5. Position in labor organization.
BUSINESS MANAGER

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).

Name BRAUER, BUESCHER, GOLDHAMMER, KELMAN

Trade Name, if any: LEGAL COUNCIL

P.O. Box, Bldg., Room No., if any

Street 1563 GAYLORD ST

City DENVER

State Colorado ZIP Code + 4 80206

7.a. Nature of Interest, Transaction, or Income.

DRINKS

7.b. Amount.

\$11

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed



On

8/12/05

Date

303 739-9300

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name CONTRACTING ADMINISTRATTION FUND OF COLORADO

Trade Name, if any: C. A. F.

P.O. Box, Bldg., Room No., if any STE 230

Street 4800 HAPPY CANYON RD

City DENVER

State Colorado ZIP Code + 4 80237

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name MAC TERRY

Trade Name, if any: C. A. F.

P.O. Box, Bldg., Room No., if any

Street SAME

City

State ZIP Code + 4

11.a. Nature of such dealing.

LABOR RELATIONS MEETINGS

11.b. Approximate dollar value of such dealing. UNKNOWN

12.a. Nature of interest held or income received.

APRIL 27 2004	- DRINKS DINNER	77.00
JULY 14 2004	- LUNCH - GOLF	65.00
NOV. 16 2004	- DINNER	49.00

12.b. Amount.

\$191

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing KURT STEENHOEK	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name DENVER PIPE INDUSTRY VACATION FUND</p> <p>Trade Name, if any: VACATION TRUST</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 6350 N. BROADWAY</p> <p>City DENVER</p> <p>State Colorado ZIP Code + 4 80216</p>	<p>9. Business deals with</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>				
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name DENVER PIPE INDUSTRY VACATION FUND</p> <p>Trade Name, if any: VACATION TRUST</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street SAME</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>QUARTERLY TRUST MEETINGS</p> <hr/> <p>11.b. Approximate dollar value of such dealing. UNKNOWN</p> <hr/> <p>12.a. Nature of interest held or income received.</p> <table> <tr> <td>6/7/2004 - LUNCH</td> <td>67.00</td> </tr> <tr> <td>10/11/2004 - LUNCH</td> <td>29.00</td> </tr> </table> <hr/> <p>12.b. Amount. \$98</p>	6/7/2004 - LUNCH	67.00	10/11/2004 - LUNCH	29.00
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<p>8. Name and address of Business (including trade name, if any).</p> <p>Name PIPE INDUSTRY HEALTH AND WELFARE FUND</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any STE 1005</p> <p>Street 2821 SOUTH PARKER</p> <p>City AURORA</p> <p>State Colorado ZIP Code + 4 80014</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>																		
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